## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE: 2

## Apr 20, 2006 08:00 AM Secretary of State DOCUMENT # L96575 1. Entity Name ASIAN PREPARED FOODS, INC. Principal Place of Business Mailing Address 4213 N. STATE RD 7 LAUDERDALE LAKES, FL 33319 4213 N. STATE RD 7 LAUDERDALE LAKES, FL 33319 No Chg-P 04152006 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0228376 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent LAM, BING KWAN DO NOT WRITE 10404 NW 59 PL PARKLAND, FL 33076 IN THIS SPACE 8. The above named antity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Agent signature required when reinstating) DATE 000000522249 \$5.00 May Be Added to Fees FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing 05/03/06-80022-016 150.00 Trust Fund Contribution. OFFICERS AND DIRECTORS 10. TITLE NAMC LAM, BING KWAN STREET ADDRESS 10404 NW 59 PL PARKLAND, FL 33076 2)TY -ST - Z)P TITLE NAME STREET ADDRESS CiTY-ST-ZIP MLE NAME STREET ADDRESS DO NOT WRITE C)TY-ST-ZXP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP 7)71.E NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attaphysical with an address, with all other like expowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.14.06

**FILED**